onf No 8928

JNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: Jorg REIMA

Application No.: 09/241,595

Filed: February 2, 1999

For: DELIVERY OF IMMUNOGENIC MOLECULES VIA HBsAg PARTICLES

Art Unit: 1632

Examiner: A. Wehbe

Washington, D.C.

Atty.'s Docket: REIMANN=1

OR

OR

Date: April 18, 2005

Honorable Commissioner for Patents U.S. Patent and Trademark Office Customer Service Window Randolph Building, Mail Stop Amendment 401 Dulany Street Alexandria, VA 22314

Sir

Transmitted herewith is a [XX] Amendment [ ]\_

in the above-identified application.

[XX] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.

No additional fee is required. 1

The fee has been calculated as shown below:

|          | (Col. 1)                                  | (Col. 2)   | (Col. 3)                              |                            |  |  |
|----------|-------------------------------------------|------------|---------------------------------------|----------------------------|--|--|
|          | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |            | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA<br>EQUALS |  |  |
| TOTAL    | • 23                                      | MINUS      | ** 30                                 | 0                          |  |  |
| INDEP.   | * 4                                       | MINUS      | *** 5                                 | 0                          |  |  |
| FIRST PR | ESENTATION OF I                           | MULTIPLE I | DEP. CLAIM                            |                            |  |  |

|                      | SMALL ENTITY |      |                   |  |  |  |  |  |
|----------------------|--------------|------|-------------------|--|--|--|--|--|
|                      | ,            | RATE | ADDITIONAL<br>FEE |  |  |  |  |  |
|                      | х            | 25   | \$                |  |  |  |  |  |
| _                    | х            | 100  | \$                |  |  |  |  |  |
|                      | +            | 180  | \$                |  |  |  |  |  |
| ADDITIONAL FEE TOTAL |              |      | \$                |  |  |  |  |  |

OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE 50 200 \$ \$ 360 \$ TOTAL

1632 HF

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

|      | Small Entity Response Filed Within                                                                                |              |   | Other Than Small Entity                          |                       |                             |        |   |     |         |  |  |
|------|-------------------------------------------------------------------------------------------------------------------|--------------|---|--------------------------------------------------|-----------------------|-----------------------------|--------|---|-----|---------|--|--|
|      |                                                                                                                   |              |   | ı                                                | Response Filed Within |                             |        |   |     |         |  |  |
|      | [ ]                                                                                                               | First        | - | \$ 60.00                                         | [                     | ]                           | First  | - | \$  | 120.00  |  |  |
|      | [XX]                                                                                                              | Second       | - | \$ 225.00                                        | [                     | ]                           | Second | - | \$  | 450.00  |  |  |
|      | [ ]                                                                                                               | Third        | - | \$ 510.00                                        | [                     | }                           | Third  | - | \$  | 1020.00 |  |  |
|      | [ ]                                                                                                               | Fourth       | - | \$ 795.00                                        | [                     | 1                           | Fourth | - | \$  | 1590.00 |  |  |
|      | Month After Time Period Set                                                                                       |              |   |                                                  |                       | Month After Time Period Set |        |   |     |         |  |  |
|      | [] L                                                                                                              | ess fees (\$ | i | ) already paid for month(s) extension of time on | ·                     |                             |        |   |     |         |  |  |
| [ ]  | Please charge my Deposit Account No. 02-4035 in the amount of \$                                                  |              |   |                                                  |                       |                             |        |   |     |         |  |  |
| [XX] | Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$_225.00.                  |              |   |                                                  |                       |                             |        |   |     |         |  |  |
| [ ]  | A check in the amount of \$ is attached (check no. ).                                                             |              |   |                                                  |                       |                             |        |   |     |         |  |  |
| [XX] | The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connec |              |   |                                                  |                       |                             |        |   | cti |         |  |  |

ction with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18

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